REC'S PCT/PTO 18 JAN 2005

"Express Mail" mailing label number <u>EV530259937US</u>.

10/521727 PTO/SB/01 (6-95)

Type a plus sign (+) inside this t	oox →	· ·	COffice; U.S. DEPARTMENT OF COMMERCE								
0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket	C 2703 PCT/US								
DECLARA [*]	TION FOR	First Named Inventor	BUCHWALD-WERNER, Sybille								
UTILITY O		COMPLETE IF KNOWN									
PATENT AP		Application Number									
IAILIIIAI	LICATION	Filing Date									
Declaration O Submitted with Initial Filing	R X Declaration Submitted after	Group Art Unit									
	Initial Filing	Examiner Name									
of the subject matter which is claimed and for which a patent is sought on the invention entitled: COSMETIC PREPARATIONS WITH ANTIBACTERIAL PROPERTIES COMPRISING (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) O7/10/2003 Application Number PCT/EP2003/007457 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.											
I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Certified Copy Attached? Not Claimed YES NO								
102 32 774.2	DE	07/18/2002									
Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:											
I hereby claim the benefit under Title			olication(s) listed below.								
Application Number(s)	Filing Date (MM/DD/YYYY)	application numbers are listed on a supplemental priority sheet attached hereto.									

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

1

DECLARATION

Page 2

I hereby claim the bene designating the United United States or PCT i to disclose information filing date of the prior a	efit under Title 3 Sates of Americ nternational app which is materi pplication and t	5, United Starca, listed belo lication in the al to patentab he national or	tes Code § w and, inso manner pr ility as defir PCT intern	120 of a ofar as rovided ned in 1 national	any Unite the subject by the fi Title 37, I filing da	ed States ect matter irst paragr Code of F ate of this	application of each raph of Tiederal Rapplication	on(s), or §36 of the claims itle 35, Unite legulations § on.	55© of any P of this appl d States Co 1.56 which t	CT internation is not de §112.1 acceme avai	onal ap disclo cknowle lable be	plication sed in the edge the etween	ne prior duty the
U.S. Pare	nt	PC.	T Parent lumber			Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)				
дривалоп на	amber	PCT/EP2003/0074			7	07/10/2003				1 4			
Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.													
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:													
Firm Name OR	э					Customer or label Number							
X List Attorney(s) a	nd/or agent(s) n	ame and regi	stration nu	mber be	elow:								
N:	Name			Registration Number			Name			Registr Num			ition er
Aaron R. Ettelm	42,51	516											
Additional attorne	y(s) and/or ager	nt(s) named o	n a supplei	mental	sheet-at	tached he	ereto.						
Please direct all correspondence to: OR Fill in correspondence address below													
Name Aa	ron R. Ettel	man											
Address										-			
Address					Lou	4.0	1			Zip	- 1		
Country		Telenh	one	21	Sta 5-628-			Fax	×		-1345	5	<u>-</u>
Country Telephone 215-628-1413 Fax 215-628-1345 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:					A petition has been filed for this unsigned inventor							or	
Given Sybille Name			Middle Initial			Family Buc Name		chwald-Werner			Suffix e.g. Jr.		
Inventor's Signature Bullustel				_					Date 08. 1		1.0	1.04	
Residence: City Duesseldor			State Country		try G	Germany		Citizensh	Citizenship German		iny		
Post Office Address	Himmelg	eister Lan	dstrasse	100									
Post Office Address													
City 40589 Dues	seldorf	State		Zip		С	ountry	German	у	Applicar Authorit	nt y		
Additional in	ventors are b	eina named	on suppl	ement	al shee	t(s) attac	ched he	reto					

